Office Juvenile Justice

MARY L. LIVERS, Ph.D., MSW, Deputy Secretary

## NOTIFICATION OF GRANTING OF FURLOUGH

NOTE: Form to be completed prior to the beginning of FURLOUGH

Date:	
Name of Youth	:
CLIENT ID #:	
Place of Furlou	gh:
On Furlough fr	om:
<u> </u>	□ <b>A.M.</b> □ <b>P.M.</b> , 2009
	THROUGH
<b>:</b>	□ <b>A.M.</b> □ <b>P.M.</b> , 2009
At least 72 hou	rs prior to furlough notification faxed to OJJ Central Office to Kim LeMaire at 225-287-7901 by:
(Name / Title)	
(Date / Time)	
At least 48 hou	rs prior to furlough notification faxed to the Bureau to Marie Campbell at 225-925-4140 by:
(Name / Title)	
(Date / Time)	ng prior to furlough notification fored to the Purcou to Mario Comphell at 225 025 4140 by
At Ivast 40 HOU	rs prior to furlough notification faxed to the Bureau to Marie Campbell at 225-925-4140 by:
(Name / Title)	
$\overline{(Date / Time)}$	